

the lumen, and an elongated support element which is fixed along a length of the distal section coextensive with at least part of the elongated depression; and

b) an elongated electrophysiological device disposed within the lumen of the elongated delivery member, having a distal end secured within the distal end of the elongated delivery member, and having a plurality of emitting electrodes on a distal portion thereof, and which is configured to extend out of and away from the elongated depression upon relative movement between the delivery member and the elongated electrophysiological device.

23. (Amended) The intravascular assembly of claim 22 wherein the elongated delivery member includes a distal opening at the distal end of the elongated depression and a proximal opening at the proximal end of the elongated depression, and wherein the elongated electrophysiology device extends out of the distal and proximal openings.

REMARKS

Response to Claim Rejections Under 35 USC § 112

Claims 22-24 are rejected by the Examiner under 35 USC §112, second paragraph, as being indefinite for failing to particularly point out and distinctly claim the subject matter which applicant regards as the invention.

Applicant believes that the Examiner has misread claim 22. Claim 22 calls for "at least one opening in the distal section in communication with the lumen". Claim 23 requires a distal opening at the distal end of the depression in the distal section and a

proximal opening at the proximal end of the depression in the distal section, which further defines the "at least one opening in the distal section", referred to in claim 22.

Applicant has changed "the shaft" to "the elongated delivery member" to correct the antecedent basis problem noted by the Examiner.

A copy of the marked-up amended claims can be found in the attached sheet entitled **VERSION WITH MARKINGS TO SHOW CHANGES MADE.**

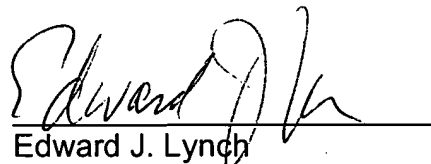
Response to Claim Rejection Under 35 USC § 102

Claims 22-24 are rejected by the Examiner under 35 USC § 102(e) as being anticipated by Thompson et al. (U.S. Patent No. 6,454,758). However, applicant believes that the Thompson et al. patent is not prior art against applicant's claims. Applicant's priority dates back to the filing date of Serial No. 629,057 (now U.S. Patent No. 5,863,291) which was April 8, 1996, well before the earliest priority date of the Thompson et al. patent which was December 19, 1996 and that assumes that disclosure found in the Thompson et al "758 patent is adequately supported by the disclosure found in the first filed Thompson et al. application (which may not be the case). Support for the pending claims is found in Figs. 1-3 and 6-19 and the respective discussions thereof in the specification of applicant's '291 patent (copy enclosed).

Conclusions

The applicant submits that a rejection under 35 U.S.C. § 102(e) is not supportable by the Thompson et al. patent and respectfully request that the rejection be withdrawn. Reconsideration and allowance of the pending claims are earnestly solicited.

Respectfully submitted,



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VERSION WITH MARKINGS TO SHOW CHANGES MADE
(Deleted words are [bracketed] and added words are underlined.)

22. (Amended) An intravascular assembly for forming a continuous lesion within a chamber of a patient's heart, comprising:

a) an elongated delivery member having proximal and distal ends, a lumen extending within at least a [section] portion of the delivery member, a distal section shapeable into a curved configuration having an inner side and an outer side, an elongated depression along one side of the distal section having a proximal end and a distal end, at least one opening in the distal section in communication with the lumen, and an elongated support element which is fixed along a length of the distal section coextensive with at least part of the elongated depression; and

b) an elongated electrophysiological device disposed within the lumen of the elongated delivery member, having a distal end secured within the distal end of the elongated delivery member, and having a plurality of emitting electrodes on a distal portion thereof, and which is configured to extend out of and away from the elongated depression upon relative movement between the delivery member and the elongated electrophysiological device.

23. (Amended) The intravascular assembly of claim 22 wherein the [shaft] elongated delivery member includes a distal opening at the distal end of the elongated depression and a proximal opening at the proximal end of the elongated depression, and wherein the elongated electrophysiology device extends out of the distal and proximal openings.